CLAIMS ONLY		Application Number 10720230		Filing Date	
		Applicant(s)			

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63						
14	1		1				64						
15		1		1			65						
16	1		1				66						
17		1		1			67						
18							68						
19							69						
20							70						
21							71						
22							72						
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40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	2		2				Total Indep						
Total Depend	2		2				Total Depend						
Total Claims	4		4				Total Claims						